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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No: 13024/35946

PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. 1.53

Box Patent Application

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): John McMichael and Michael Allen

Title: Treatment of Symptoms of Asthma, Allergies and Otitis Media

1. Type of Application

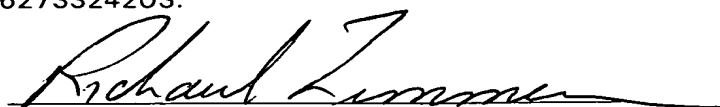
- ☒ This is a new application for a
 - ☒ utility patent.
 - ☐ design patent.
- ☒ This is a continuation-in-part application of prior application no. 09/432,948.

2. Application Papers Enclosed

- 1 Title Page
- 19 Pages of Specification (excluding Claims, Abstract, Drawings & Sequence Listing)
- 3 Page(s) of Claims
- 1 Page(s) of Abstract
- 0 Sheet(s) of Drawings (Figs. ___ to ___)
 - ☐ Formal
 - ☐ Informal
- 0 Page(s) of Sequence Listing

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this Patent Application Transmittal and the documents referred to as enclosed therewith are being deposited with the United States Postal Service on **February 1, 2000**, in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 utilizing the "Express Mail Post Office to Addressee" service of the United States Postal Service under Mailing Label No. EM362733242US.


 Richard Zimmermann

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- ☐ Preliminary Amendment
- ☐ Information Disclosure Statement
- ☐ Declaration of Biological Deposit
- ☐ Computer readable copy of sequence listing containing nucleotide and/or amino acid sequence
- ☐ Microfiche computer program
- ☐ Verified statement(s) claiming small entity status under 37 CFR 1.9 and 1.27
- ☐ Associate Power of Attorney
- ☐ Verified translation of a non-English patent application
- ☐ An assignment of the invention
- ☒ Return receipt postcard
- ☐ Other

THE **NEW** **YORK** **PUBLIC** **LIBRARY**

☐ are attached.

☐ will follow.

COUNTRY	APPLICATION NO.	FILED

A. ☒ Utility Application

CLAIMS AS FILED - INCLUDING PRELIMINARY AMENDMENT (IF ANY)						
			SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	NO. FILED	NO. EXTRA	RATE	FEE	RATE	FEE
BASIC FEE				\$345.00		\$690.00
TOTAL	20 -20	= 0	X 9 =	\$	X 18 =	\$0.00
INDEP.	3 - 3	= 0	X 39 =	\$	X 78 =	\$0.00
<input type="checkbox"/> First Presentation of Multiple Dependent Claim			+ 130 =	\$	+ 260 =	\$0.00
Filing Fee:				\$	OR	\$690.00

- [illegible]

Total Fees Enclosed \$690.00

7. **Method of Payment of Fees**

- ☒ Enclosed check in the amount of: \$690.00
- ☐ Charge Deposit Account No. 13-2855 in the amount of: \$ _____
A copy of this Transmittal is enclosed.
- ☐ Not enclosed

8. **Deposit Account and Refund Authorization**

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 37 CFR 1.17 or under other applicable rules (except payment of issue fees), to Deposit Account No. 13-2855. A copy of this Transmittal is enclosed.

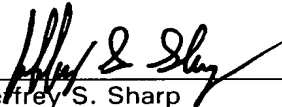
Please refund any overpayment to Marshall, O'Toole, Gerstein, Murray & Borun at the address below.

Please direct all future communications to Jeffrey S. Sharp, at the address below.

Respectfully submitted,

MARSHALL, O'TOOLE, GERSTEIN,
MURRAY & BORUN
6300 Sears Tower
233 South Wacker Drive
Chicago, Illinois 60606-6402
(312) 474-6300
(312) 474-0448 (Telefacsimile)

By: _____


Jeffrey S. Sharp
Reg. No: 31,879

February 1, 2000

007020-98750760